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[Improvements Needed in Processing Civil Service Retirement Claims]. FPCD-78-10; B-179810. January 30, 1978. 3 pp. + 3 appendices (15 pp.).

Report to Rep. John E. Moss; by Elmer B. Staats, Comptroller General.

Issue Area: Federal Personnel Management and Compensation: Administration of Retirement Programs (308); Federally Sponsored or Assisted Income Security Programs: Payment Processes, Procedures, and Systems (1309).

Contact: Federal Personnel and Compensation Div.

Budget Function: Income Security: Federal Employee Retirement and Disability (602).

Organization Concerned: Civil Service Commission; Civil Service Commission: Bureau of Retirement, Insurance, and Occupational Health.

Congressional Relevance: Rep. John E. Moss.

Authority: 5 U.S.C. 83.

The processing function for civil service retirement and refund claims includes employing-agency processing of individual retirement records and adjudication of claims by the Civil Service Commission's (CSC) Bureau of Retirement, Insurance, and Occupational Health. An estimated 160,000 retirement and survivor annuitant claims and 132,000 refund claims were processed in fiscal year 1977.

Findings/Conclusions: Employing agencies have not met established standards in submitting individual retirement records to the Bureau. Delays occur because of poor coordination, low priority assignment, erroneous data, and personnel shortages. The Bureau has not been effective in speeding up the process or in assisting agencies in identifying causes of delays and following up on corrective actions. It does not have established claims processing standards and, after receiving retirement records from agencies, does not process claims promptly. Financial hardship to retiring employees and survivor claimants has resulted from delays and the fact that survivor claimants did not receive special payments while claims were being processed. Also, the Bureau has not carried out the CSC policy of requiring complete and timely replies to correspondence. CSC recently instituted several new policies and procedures which should speed up payments, but additional steps are needed. Recommendations: The Chairman of CSC should: assign a higher priority to the Bureau's monitoring of employing-agency performance in submitting timely, complete, and accurate retirement records and files and have Bureau officials work with agency officials to identify problems and take corrective action; establish a time standard for the timeliness of claims processing; determine why replies to correspondence have not been made more quickly and assess whether established time

standards are realistic; and place greater emphasis on promptness in providing requested survivor claim application forms. (HTW)

5201



REPORT OF THE COMPTROLLER GENERAL OF THE UNITED STATES

RESTRICTED -- Not to be released outside the General Accounting Office except on the basis of specific approval by the Office of Congressional Relations.

Improvements Needed In Processing Civil Service Retirement Claims

Processing civil service retirement and refund claims and answering claims inquiries take too long.

The Civil Service Commission recently instituted several new policies and procedures which should speed up payments to survivor claimants, but the Commission should take additional steps to improve overall timeliness in processing claims and responding to correspondence.



COMPTROLLER GENERAL OF THE UNITED STATES
WASHINGTON, D.C. 20548

B-179810

The Honorable John E. Moss
House of Representatives

Dear Mr. Moss:

Your letter of March 11, 1977, asked us to evaluate the response to and resolution of compensation claims under several Federal programs and to answer certain specific, related questions. This report deals with civil service retirement and refund claims and is one of several reports we are submitting in response to your request.

TIMELINESS OF PROCESSING CLAIMS

Based on our review of claims and other information, we found the claims processing function to be lengthy. This process includes employing-agency processing of individual retirement records and adjudication of the claims by the Commission's Bureau of Retirement, Insurance, and Occupational Health.

Employing agencies have not met established standards in submitting individual retirement records to the Bureau. For example, although the standard is 30 days, it took employing agencies about 40 days to submit retirement records for refund claims and about 35 days to submit retirement records for survivor benefit claims. Delays such as these occur because of (1) poor coordination and communication between agency personnel and payroll offices, (2) the low priority assigned the retirement function, (3) the reporting of erroneous data, and (4) personnel shortages and turnovers.

The Bureau has not been effective in speeding up employing agencies' submission of retirement records. Furthermore, the Bureau has not been sufficiently aggressive in encouraging and assisting employing agencies in identifying the causes of delays in submitting retirement records and in following up on corrective actions planned or taken.

The Bureau does not have established claims processing standards. Once it receives retirement records from employing agencies, it does not process claims quickly. It averaged 129 days to process disability claims, 62 days to process deceased annuitant claims, and 83 days to process deceased employee survivor claims. Bureau processing of claims is hampered by the submission of incomplete and inaccurate data by employing agencies, Bureau personnel turn-overs, and claim backlogs.

Although special payments, monthly approximations of the retiree's net monthly annuity, are provided to claimants while regular and disability retirement claims are being processed, claimants entitled to survivor benefits, until recently, were not generally provided such payments while their claims were being finalized. Subsequent to our review, the Bureau instituted a new policy of providing special, advance payments to survivors of deceased employees and retirees.

Employing-agency delays in forwarding retirement files, coupled with the Bureau's processing of claims, cause lengthy processing times which can result in financial hardship or inconvenience to retiring employees and survivor claimants.

TIMELINESS IN RESPONDING TO CORRESPONDENCE

Commission policy requires complete and expeditious replies to all correspondence but this policy is not being carried out. The Commission's standard for replying to inquiries is 5 days for congressional inquiries and 10 days for personal inquiries, but the Bureau took an average of 21 days and 43 days, respectively. In addition, the Bureau averaged over 26 days just to supply requested survivor annuity application forms.

Appendix I contains a more detailed discussion of claims processing and correspondence response times as well as the answers to the other specific questions in your request letter. Appendix III contains the samples of the Commission's form letters which you requested.

RECOMMENDATIONS

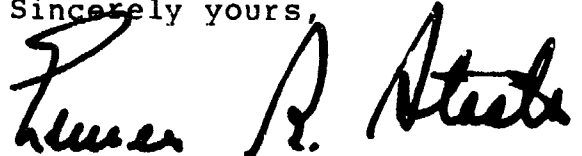
To improve the timeliness of processing claims and responding to correspondence, we recommend that the Chairman of the Civil Service Commission:

- Assign a higher priority to the Bureau's monitoring of employing-agency performance in submitting timely, complete, and accurate retirement records and files; have Bureau officials work with employing-agency officials to identify the causes of poor performance and, where possible, suggest corrective actions; and require Bureau followup on corrective actions taken or planned by the agencies.
- Establish a time standard to measure and assess the timeliness of claims processing. Such a standard would not only enable the Bureau to identify delays in the claims process but could also be used to identify those aspects of the process that require corrective action to reduce or eliminate delays.
- Determine why replies to correspondence have not been made more quickly and assess whether the established time standards for responding are realistic.
- Place greater emphasis on promptness in providing requested survivor claim application forms.

As you requested, we did not obtain formal comments from the Commission. However, we discussed all issues in this report with Bureau officials and considered their views in preparing it.

As arranged with your office, unless you publicly announce its contents earlier, we plan no further distribution of this report until 7 days after the date on the cover. At that time, we will send copies to the Commission and make the report available to the public.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Luther R. Stucke". The signature is fluid and cursive, with the first name "Luther" and last name "Stucke" being more prominent than the middle initial "R.".

Comptroller General
of the United States

CIVIL SERVICE RETIREMENT SYSTEM CLAIMS PROCESSINGINTRODUCTION

The civil service retirement system (5 U.S.C. chapter 83), is administered by the Commission's Bureau of Retirement, Insurance, and Occupational Health. Membership includes about 2.7 million civilian employees of the Federal Government and the District of Columbia. The Bureau estimated that over 160,000 retirement and survivor annuitant claims and 132,000 refund claims were processed in fiscal year 1977. Each type of claim is discussed below.

Refund claim

A refund is the return to an employee of the contributions made by the employee to the retirement fund. The refund is payable when the employee is separated from Government service or is transferred to a position which is not under the retirement system. Individuals separated from Government service may elect to withdraw their retirement contributions or they may leave them in the retirement fund.

Survivor claim

An active Federal employee's survivor annuity is determined by marital status and length of service at the time of the employee's death. In the case of a deceased retiree, benefits to the retiree's survivors are based on marital status at time of death and whether the retiree elected a survivor annuity. Children of the deceased retiree may be eligible for an annuity until age 18. They may retain eligibility until age 22 if they are attending a recognized institution of learning full time or indefinitely if they are incapable of self-support because of disability.

Regular retirement claim

Regular retirement annuities cover optional, deferred, discontinued service, and mandatory retirements. Eligibility for each form of retirement is based on age and years of Government service.

Disability claim

A Federal employee may retire on disability after 5 years of civilian service if, because of disease or injury, the employee is unable to perform useful and efficient service in the grade or class of position last occupied. Conditions caused by vicious habits, intemperance, or willful misconduct do not qualify as disabling.

PROCESSING OF RETIREMENT CLAIMS

Retirement claims processing is a function of both employing agencies and the Bureau. Agencies establish and maintain an individual retirement record for each employee covered under the civil service retirement system. The retirement record, which lists pertinent service history and cumulative contributions to the retirement system, is certified by an authorized certifying officer and sent to the Bureau after an employee separates from the agency.

Receipt of an employee's individual retirement record, along with an application for benefits, is the first step in the Bureau's retirement claims process. The Bureau's records division located in Boyers, Pennsylvania, assembles the claim and makes initial determination as to whether a case should be placed in special payment status. Special payment is a monthly approximation of the retiree's net monthly annuity and is provided to alleviate financial hardships while the claim is being processed.

Retirement claims are forwarded to the claims division, Washington, D.C., for adjudication of eligibility for benefits and computation of annuity rate. Claims examiners are responsible for ensuring that all cases are complete and accurate before releasing them to the fiscal division for entry on the annuity roll.

Refund claims are processed by the refund and deposit section in Boyers, Pennsylvania. Refund examiners review the validity of claims and the accuracy of payments and forward vouchers for payment to the U.S. Treasury.

SCOPE OF REVIEW

We performed our review at the Civil Service Commission, Washington D.C., and its records division in Boyers, Pennsylvania. We randomly sampled and reviewed about 300

claims for refunds, survivor benefits, and optional and disability retirement annuities that were finalized by the Commission in March 1977. In addition, we reviewed other selected cases with congressional involvement, including several cases provided by your office. Where necessary we supplemented the information through discussions with Commission and/or employing-agency representatives. We also reviewed appropriate legislation and Federal regulations and examined selected correspondence in the Commission's complaint and inquiry files.

QUESTIONS AND ANSWERS

Our answers to the specific questions in your March 11, 1977, letter are contained in the following paragraphs. The averages shown are based on our review. As used in the discussion and tables below, "congressional intervention" means that a Member of Congress wrote to the Commission in behalf of the claimant.

On the average, how long does it take to respond to a case or claim, both with or without congressional intervention?

The Bureau receives over 750,000 pieces of correspondence each year. In addition, approximately 350,000 retirement, survivor, disability, and refund claims are received annually. While it is Commission policy to provide complete and expeditious replies to all correspondence, this policy is not being carried out.

Response to claims

The Bureau generally uses form letters to acknowledge receipt of regular and disability retirement claims filed through employing agencies. Bureau officials stated that acknowledgment of such claims should be made within 10 days. The Bureau generally acknowledged receipt of retirement claims in about 11 days.

Survivor and refund claims are not presently acknowledged upon receipt. Bureau officials said that procedures are being developed to acknowledge receipt of agency-filed survivor claims. Receipt of refund claims are not acknowledged because of the short processing time involved.

Impact of congressional inquiries on Bureau response times

We reviewed 42 cases with congressional interest to determine the impact congressional intervention had on the time it took the Bureau to acknowledge receipt of the claim. In all but one case, congressional inquiries were made after the Bureau had advised the claimants that it had received their claims for processing. Consequently, congressional intervention had no impact on Bureau response times. The one exception involved a congressional inquiry that was sent to the employing agency before the agency began processing the claim and before it was forwarded to the Bureau.

Response to personal inquiries

It is Commission policy that correspondence of a routine nature received from the general public be acknowledged within 5 working days of receipt when it appears that a complete reply cannot be made within 10 working days. In the cases we reviewed that contained personal inquiries, the Bureau averaged almost 43 days to reply. Moreover, there was no evidence that the Bureau acknowledged receipt of the inquiries.

The Bureau also receives requests for retirement and refund application forms. Although we did not determine response times to requests for all types of application forms, our analysis showed that the Bureau took over 26 days to answer requests for survivor annuity applications. Bureau officials attribute this delay to key personnel shortages.

Response to congressional inquiries

The Commission's policy concerning congressional inquiries is that if a final reply cannot be prepared within 5 working days, it should be acknowledged within 2 working days of receipt of the inquiry. Our analysis of cases with congressional inquiries showed that the Bureau averaged almost 12 days to acknowledge receipt of inquiries and an additional 24 days to reply. For those inquiries where receipt was not acknowledged, the Bureau averaged about 21 days to reply. In the Bureau director's opinion, the Commission's standard regarding responses to congressional inquiries is unrealistically low because of the internal coordination necessary to acknowledge and respond to such inquiries.

Internal Bureau quality assurance reviews have also shown that the congressional correspondence policy is not being carried out. These reviews included recommendations to the Bureau director which could improve response times. One recommendation, for example, was to have responses to congressional inquiries reviewed and approved by individuals at a lower level in the Bureau. Another recommendation was to acknowledge receipt of all congressional inquiries, since most responses cannot be completed within 5 days. Although accepted in principle by various divisions, these recommendations have not been implemented throughout the Bureau.

On the average, how long does it take to resolve a case or claim, both with or without congressional intervention?

Generally, the claims processing function, which includes employing-agency processing of individual retirement records and the Bureau's adjudication of claims, is lengthy. Agencies have not submitted all retirement records to the Bureau in a timely manner. In addition, the Bureau is unable to process claims quickly because of claim backlogs, the high turnover of claim examiners, and inaccurate and incomplete information submitted by either the claimant or the employing agency.

Agency processing of retirement records

The employing agency is responsible for submitting an individual's retirement record to the Bureau upon separation of an employee. The Federal Personnel Manual, supplement 831-1, subchapter S22, states that the retirement record should be submitted to the Bureau by the employing agency no later than 5 days after the date of the retiring employee's final paycheck. The Bureau has interpreted this to be 30 days from the date of employee separation.

Agencies have not submitted all retirement records to the Bureau promptly. Processing of retirement records for refund and deceased employee survivor claims, in particular, exceeded the 30-day standard. The following table shows agency processing time for the various types of claims.

<u>Type of claim</u>	Average time from employee separation to receipt of retirement file at the <u>Bureau</u>	
	(calendar days)	
Refund	40.1	
Regular retirement	26.2	
Disability	28.2	
Survivor:		
Deceased employee	34.7	

Agency performance in submitting retirement records is monitored by the Bureau through an "aging of separation" report. This report shows agency timeliness in submitting retirement records during a specific period. As a result of this report, form letters indicating agency performance are sent to most agencies. The heads of the five agencies with the worst records are sent personal letters and asked to take corrective steps to speed up submission of retirement records.

Bureau officials advised us that because of personnel shortages they have been unable to effectively monitor agency performance and follow up on corrective actions, and they have therefore assigned a low priority to this monitoring function. Consequently, aging of separation reports have been prepared infrequently and the Bureau has not consistently monitored or followed up on corrective actions being taken by those agencies considered to take the most time to submit retirement records. According to the most recent aging of separation report, dated September 1976, 18 of 63 agencies (29 percent) did not submit retirement records within 30 days. Although a September 1977 aging report was prepared, Bureau officials told us that they planned little or no monitoring of agency performance based on the report.

We contacted several Federal agencies to determine why delays occur in submitting retirement records to the Bureau. Agency officials told us that delays occur for several reasons including: (1) poor coordination and communication between agency personnel and payroll offices, (2) the low priority assigned the retirement function, (3) the reporting of erroneous data, and (4) personnel shortages and turnovers.

Bureau processing of claims

The Bureau is responsible for adjudication of claims filed by claimants and employing agencies. Although concerned with the timeliness of claims processing, the Bureau has no criteria to evaluate its performance or identify delays in the claims process.

Our analysis of recent annuity and refund cases showed that Bureau processing time can be lengthy. The following table shows a breakdown of processing time for various claims.

Average Processing Time in Calendar Days

<u>Type of claim</u>	<u>Receipt of forms to special payment</u>	<u>Special payment to final adjudication</u>	<u>Total Bureau processing time</u>
Refund	-	-	a/12.7
Regular retirement	11.9	41.0	52.9
Disability	57.6	71.6	129.2
Survivor:			
Deceased annuitants	-	-	a/62.4
Deceased employees	-	-	a/82.7

a/Represents time from receipt of claim forms to final adjudication.

As shown in the table, the Bureau begins special payments to regular retirement claimants in about 12 days after receipt of the claim from the employing agency. On the other hand, the Bureau averages about 58 days to process disability claims for special payments. Disability claims require added processing before special payments are made. Bureau medical officers must first determine the validity of disability claims, and processing is often delayed when

claimants are asked to undergo additional medical examinations. The average disability case took about 29 days from receipt of claim to medical determination. The Bureau took an additional 28 days for quality control reviews and mailing between regional medical offices and Bureau headquarters in Washington, D.C.

Bureau processing of claims was delayed by the submission of incomplete and inaccurate data by employing agencies, Bureau personnel turnovers, and claim backlogs.

Employing agencies contribute significantly to Bureau processing delays. The Bureau frequently receives incomplete and inaccurate employee Government service histories and files with missing documents from employing agencies. When incomplete or inaccurate files are received, the Bureau must obtain the needed information before adjudicating the claim. About 31 percent of the disability claims received by the Bureau required further development. About 17 percent of regular retirement and 23 percent of deceased employee survivor claims required further development.

The Bureau is making efforts to eliminate delays in the claims process. In the case of deceased annuitant survivor claims, for example, procedures are being developed to provide for automatic cancellation and reclaiming of outstanding regular or disability annuity checks. This should alleviate the lengthy delay now encountered in accounting for outstanding checks before survivor claims are finalized. Subsequent to the completion of our review in November 1977, the Bureau also instituted a new policy of providing special, advance payments to survivors of deceased employees and retirees while their claims are being finalized.

To reduce processing delays due to incomplete or inaccurate service histories, the Bureau has implemented a revised form entitled "Information in Support of Civil Service Retirement Application." This form provides for the employing agency to have employees verify their Government service histories prior to retirement.

Impact of congressional inquiries on claims processing times

The Bureau received 4,765 congressional inquiries against a total of 349,500 regular retirement, disability, survivor, and refund claims during fiscal year 1976. Thus, claims with congressional inquiries accounted for less than 2 percent of the total claims received during the

period. Bureau officials estimated that half of the congressional inquiries were requests for expedited services; the remainder were requests for reports on contested Bureau allowances.

To determine the full impact of congressional intervention on claims processing times, the Bureau would have had to receive congressional inquiries when the processing of each claim began. Generally, the Bureau receives congressional inquiries during the final stages of processing when the claims are either awaiting or in final adjudication. It is not possible therefore to measure the impact congressional intervention had on the timeliness of the claims process. Based on our review of claims and inquiries, however, it took the Bureau an average of about 45 days to finalize a claim after receipt of a congressional inquiry.

Bureau officials told us that they have been interested for a long time in knowing what impact, if any, congressional intervention has on the timeliness of claims processing. Despite this longstanding interest, however, they have not attempted to devise a means of identifying or measuring the impact of congressional inquiries.

How large are the backlogs, in terms of number of cases and how long it would take to eliminate them?

Personnel turnovers and lack of experienced claims examiners have contributed to a backlog of cases awaiting final adjudication. According to the Bureau director, 42,568 annuity and survivor claims, representing 91 days' work for the adjudicating staff, were on hand as of July 16, 1977. Refund claims on hand totaled 4,735, or 10 days work. In addition, there were 19,420 unworkable claims on hand, such as disability claims awaiting expiration of sick leave and deferred annuities with future commencing dates.

The Bureau director told us that additional permanent and temporary staff has been recruited to reduce some of the claim backlogs. Furthermore, the Bureau is trying to hire claim technicians to do some of the work normally performed by claim examiners.

How many people and dollars are involved in each program?

Bureau estimates of the staff-years and costs to process each type of claim in fiscal year 1977 follow.

<u>Type of claim</u>	<u>Staff-years</u>	<u>Costs</u>
Refunds	16.6	\$ 201,800
Regular retirement and survivor (note a)	195.2	3,802,900
Diability (note b)	38.1	1,305,600

a/Includes optional, deferred, discontinued service, and mandatory retirements.

b/Includes work performed at six Commission regional offices.

Are complaints routinely discarded if unaccompanied by a congressional inquiry?

Based on our review, we believe that the Bureau responds to all complaints and inquiries by claimants.

What kinds of responses are sent: Are they form letters or personalized answers delving into the facts of a case?

Although form letters are used to a great extent in replying to correspondence and acknowledging receipt of claims, any question or problem which must be explained in depth or with reference to a particular situation is answered with a personalized letter. Examples of several form letters used by the Bureau to acknowledge correspondence and claims are in appendix III.

Where medical referrals are made to private doctors, how long is the response time on the part of physicians?

According to the Bureau director, it takes from 2 to 4 weeks to arrange an appointment with a private physician and an additional week to receive the results of his examination.

Are doctors paid before they perform their services or afterwards?

According to the Bureau director, all doctors are paid only after services have been provided.

In the case of contract doctors, are they paid routinely or on the basis of services performed?

According to the Bureau director, outside doctors are paid only on the basis of services performed.

What recommendations, if any, does GAO have to alleviate or resolve these situations?

To improve the timeliness of processing claims and responding to correspondence, we recommend that the Chairman of the Civil Service Commission:

- Assign a higher priority to the Bureau's monitoring of employing agencies' performance in submitting timely, complete, and accurate retirement records and files; have Bureau officials work with employing agency officials to identify the causes of poor performance and, where possible, suggest corrective actions; and require Bureau followup on corrective actions taken or planned by the agencies.
- Establish a time standard to measure and assess the timeliness of claims processing. Such a standard would not only enable the Bureau to identify delays in the claims process but could also be used to identify those aspects of the process that require corrective action to reduce or eliminate delays.
- Determine why replies to correspondence have not been made more promptly and assess whether the established time standards for responding are realistic.
- Place greater emphasis on promptness in providing requested survivor claim application forms.

JOHN E. MOSS
3RD DISTRICT
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GOVERNMENT INFORMATION AND INDIVIDUAL RIGHTS

INTERSTATE AND FOREIGN COMMERCE COMMITTEE:
CHAIRMAN,
OVERSIGHT AND INVESTIGATIONS SUBCOMMITTEE

March 11, 1977

Elmer B. Staats
Comptroller General
of the United States
General Accounting Office
Washington, D.C. 20548

Dear Elmer:

For some years the volume of constituent and Congressional staff complaints over difficulties in terms of response to and resolution of certain compensation claims has risen constantly. Consistently, I and my colleagues hear bitter recriminations from the average citizen over the difficulty they encounter in submitting a claim with documentation and receiving Federal compensation. Such complaints center around the Social Security Administration, the Labor Department, the Civil Service Commission and the Veteran's Administration. They deal with inordinate delays, lost documents, form letters, lengthy forms, huge backlogs, long delayed or perfunctory medical examinations and the like.

Labor's Workmans' Compensation Program, SSA's Appeals system and the entire range of U.S.C.S.C. programs are seemingly the worst offenders. Therefore, I would like GAO to evaluate the three largest programs in each of the four agencies mentioned, concentrating on seeking answers to the following questions:

- 1) On the average, how long does it take to respond to a case or claim, both with or without Congressional intervention?

- 2) On the average, how long does it take to resolve a case or claim, both with or without Congressional intervention?
- 3) How large are the backlogs, in terms of numbers of cases and how long it would take to eliminate them?
- 4) How many people and dollars are involved in each program?
- 5) Are complaints routinely discarded if unaccompanied by a Congressional inquiry?
- 6) What kinds of responses are sent; are they form letters or personalized answers delving into the facts of a case?
- 7) Where medical referrals are made to private doctors, how long is the response time on the part of physicians?
- 8) Are doctors paid before they perform their services or afterwards?
- 9) In the case of contract doctors, are they paid routinely or on the basis of services performed?
- 10) What recommendations, if any, does GAO have to alleviate or resolve these situations?

With respect to the USCSC, I wish GAO would examine retirement, refund and hospital claims. The contact on my staff for this letter is Franklin Silbey. Thank you.

Sincerely,



John E. Moss
Member of Congress

JEM:Ft

**UNITED STATES CIVIL SERVICE COMMISSION
BUREAU OF RETIREMENT, INSURANCE, AND OCCUPATIONAL HEALTH
WASHINGTON, D.C. 20415**

YOUR RETIREMENT APPLICATION HAS BEEN RECEIVED

We have received your application for retirement and individual retirement record from your employing agency. Your application will be processed as promptly as possible.

As soon as we complete work on your application, we will send you information on the amount of your annuity, when to expect your first check, and other information of importance to you as a retired employee of the U.S. Government. If necessary, we will include in your first check any back annuity due so there will be no loss to you for the time we need to do our work.

Please notify us promptly of any change in your address, giving your full name and CSA number as shown above. Also notify your old post office of any change of address so they can forward any mail to your new address.

Your regular monthly payments will be made by check, on the first business day of each month, covering your annuity for the preceding month.

CLAIMS DIVISION

GPO 863-595

BRI 46-29
March 1973

UNITED STATES CIVIL SERVICE COMMISSION
BUREAU OF RETIREMENT, INSURANCE, AND OCCUPATIONAL HEALTH
WASHINGTON, D.C. 20415

IMPORTANT INFORMATION
ABOUT
SPECIAL PAYMENT STATUS

WE ARE PLACING YOU IN A SPECIAL PAYMENT STATUS WHILE WE PROCESS YOUR APPLICATION FOR RETIREMENT. A TREASURY CHECK FOR THE AMOUNT IN THE FIRST SPECIAL PAYMENT BLOCK WILL BE MAILED WITHIN A WEEK TO COVER THE PERIOD OF TIME SINCE YOUR RETIREMENT. A CHECK FOR THE AMOUNT SHOWN IN THE CONTINUING MONTHLY SPECIAL PAYMENT BLOCK BELOW WILL BE MAILED TO YOU ON THE FIRST BUSINESS DAY OF EACH MONTH UNTIL WORK ON YOUR APPLICATION IS COMPLETED.

COMMENCING DATE OF SPECIAL PAYMENT	FIRST SPECIAL PAYMENT	CONTINUING MONTHLY SPECIAL PAYMENT
	\$	\$

SPECIAL PAYMENTS ARE NOT AN EXACT COMPUTATION OF YOUR MONTHLY ANNUITY. THEY ARE HOWEVER A MEANS OF ASSURING THAT YOU HAVE MONEY TO WHICH YOU ARE ENTITLED WHILE WE COMPLETE NECESSARY WORK ON YOUR APPLICATION. AS SOON AS YOUR APPLICATION IS COMPLETELY PROCESSED, WE WILL SEND YOU A CIVIL SERVICE ANNUITY STATEMENT AND ATTACHMENTS. ON YOUR ANNUITY STATEMENT, THE EXPLANATION OF YOUR INITIAL REGULAR ANNUITY PAYMENT WILL SHOW A ONE TIME DEDUCTION FOR THE TOTAL SPECIAL PAYMENTS MADE TO YOU.

BRI 46-285A
DECEMBER 1973

**UNITED STATES CIVIL SERVICE COMMISSION
BUREAU OF RETIREMENT, INSURANCE, AND OCCUPATIONAL HEALTH
WASHINGTON, D. C. 20415**

You are entitled to an annuity, as shown below, payable in monthly installments:

NAME OF DECEASED	LSF -
YOUR ANNUITY BEGINS ON	RATE OF YOUR ANNUITY
AND WILL CONTINUE FOR THE REMAINDER OF YOUR LIFE UNLESS YOU REMARRY. IF YOU REMARRY YOUR ANNUITY WILL STOP.	

Annuities are paid by check monthly on the first business day of the month following the month for which the annuity is due. For example, if an annuity commencing date is September 1, the first payment is due on October 1. The first Treasury check will include any back annuity payments due.

If you remarry your annuity will be discontinued. Notice of remarriage should be given this office at the earliest possible date. It is unlawful to cash an annuity check covering any period of time after your remarriage.

Notice of any change of address should be received in this office before the fifth day of the month in order to insure prompt delivery of your next check. Such notice should give the LSF number (shown above), the name of the deceased, his date of birth, your old and new addresses (including ZIP Codes) and your personal signature. Mail the notice to the Bureau of Retirement, Insurance, and Occupational Health, United States Civil Service Commission, Washington, D. C. 20415. We suggest that you also notify your postmaster of any change in address (including ZIP Code) so that he can forward your mail.

CLAIMS DIVISION

By _____
Chief of Section

BRI 46-81a
OCTOBER 1960

UNITED STATES CIVIL SERVICE COMMISSION
BUREAU OF RETIREMENT, INSURANCE, AND OCCUPATIONAL HEALTH
WASHINGTON, D.C. 20415

CLAIM NUMBER
POSITION

Your application for retirement under the disability provisions of the Civil Service Retirement Law has not been approved because total disability for useful and efficient service in the above position is not shown.

A careful review and evaluation by the Commission's medical staff of all evidence submitted in your case fails to establish that you have a disability severe enough to prevent useful, efficient, and safe performance of the essential duties of the position from which you are seeking retirement. Since the retirement law does not authorize benefits based on partial disability, your application cannot be approved at this time.

If you believe that the action taken on your application is not proper, you may request reconsideration of our finding within 15 calendar days after the date you receive this letter. Any request you make should show your name and address (including ZIP code), the claim number shown above and the reason for the request for reconsideration. You may submit with your request any additional evidence which you think might support your request. Address your request for reconsideration to:

U. S. Civil Service Commission
Bureau of Retirement, Insurance, and
Occupational Health
Chief, Medical Division
Washington, D.C. 20415

Sincerely,

Chief of Section
Claims Division

Enclosure

BRI 46-13
July 1975

UNITED STATES CIVIL SERVICE COMMISSION
BUREAU OF RETIREMENT, INSURANCE, AND OCCUPATIONAL HEALTH
WASHINGTON, D. C. 20415

NAME
DATE OF BIRTH
DATE OF SEPARATION

We have received an Individual Retirement Record and an Application for Refund of Retirement Deductions for the person named above who was formerly employed in your agency. Information in the case indicates that this person may be indebted to the United States.

We will delay payment of this refund for sixty days from the date of this letter to enable your office to submit, in duplicate, a "Request for Recovery of Debt Due the United States" if an indebtedness does exist. (See Subchapter S19, Federal Personnel Manual, Supplement 831-1.)

IMPORTANT: If you determine that this employee is not indebted, or that some other means of recovery will be utilized, please notify us promptly so that his refund may be paid as soon as possible.

Chief, Refund and Deposit Section
Claims Division

GRI 47-09
JANUARY 1971

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